

# EXHIBIT 2

# Nucleotomy of the Sheep Spine: A Pilot Study

## Operative Record

Date: [REDACTED]

Sheep Ear Tag # purple #4

Age (approx): \_\_\_\_\_

Preoperative neurological status: Normal Other: \_\_\_\_\_

Surgeons: H.B. Seim, A.S. Turner Other: Walter Weir

Anesthetist: D. Parker, A.H.T.; \_\_\_\_\_ Other?: Ellen Shaub Surgery Techs.: Lauren Kossmer

Antibiotics: Ancef® (Cefazolin sodium) Pre-op: X Intra-op: X Post-op: X

Phenylbutazone: X

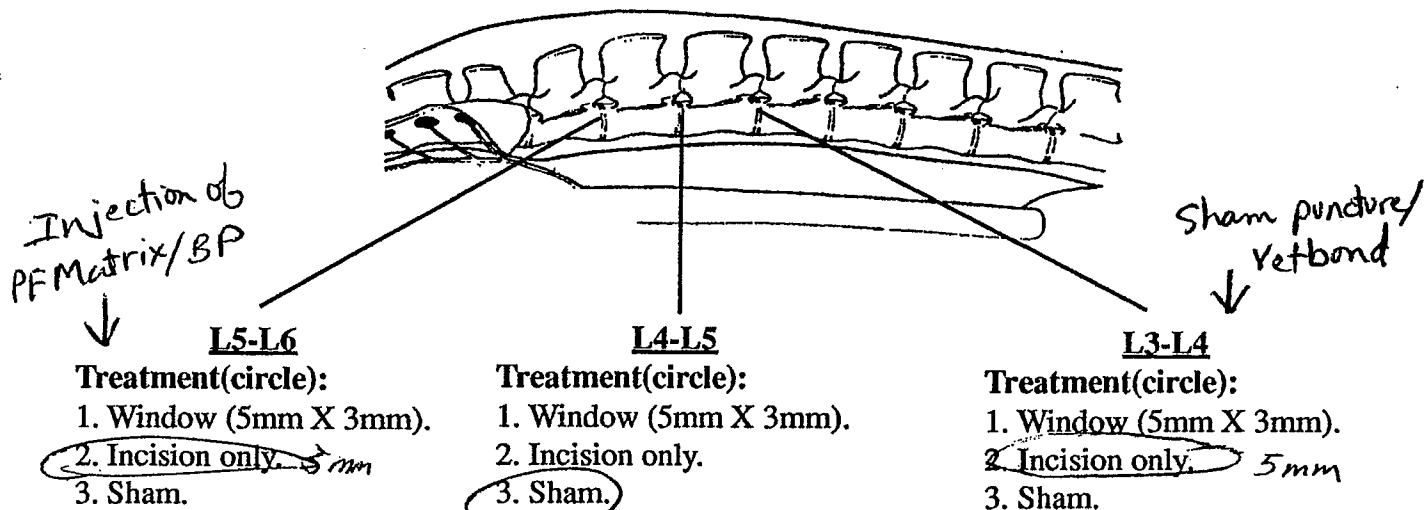
### SURGICAL TECHNIQUE

Position of Sheep: RIGHT Lateral Recumbency

-retroperitoneal approach to L3-L5 transverse process: ✓

-L2-L5 vertebral body exposure: ✓

Incisions in anulus fibrosus:



Closure:

Subcutaneous tissues (Circle): 2/Dexon; 2/0 Vicryl; 2/0 PDS  
Skin (circle): 2/0 Nylon; Stainless skin steel staples

Intraoperative Complications (describe):

Postoperative Complications(describe):

Immediate (Day 1) postoperative neurologic status:

- 0 = Walking w/o any detectable ataxia
- 1 = Walking, slightly ataxic
- 2 = Walking, but with noticeable weakness on one side or both sides.
- 3 = Able to stand on forelimbs but dragging rear limbs
- 4 = Recumbent and unable to rise.

Observations made by: William P. [Signature]

Date: [REDACTED]

L5-L6  
\* ~ 0.2 ml matrix injected. Sealed with Vetbond

L3-L4  
sham puncture, needle insertion felt rough, as if fibrous

# Disc Replacement Therapy Following Intervertebral Disc Degeneration: A Pilot Study in Sheep

## Operative Record #2

Date: [REDACTED]

Sheep Ear Tag # 4 purple

Age (approx): \_\_\_\_\_

Preoperative neurological status: Normal Other: \_\_\_\_\_

Surgeons: H.B. Seim, A.S. Turner, L. Southwood Other: \_\_\_\_\_

Anesthetist: D. Parker, A.H.T; \_\_\_\_\_ Other?: \_\_\_\_\_ Surgery Techs.: Lauren Kauffman

Antibiotics: Ancef® (Cefazolin sodium) Pre-op: X Intra-op: X Post-op: X

Phenylbutazone: X

### SURGICAL TECHNIQUE

Pre-op 4 small vacutainers of blood for serum

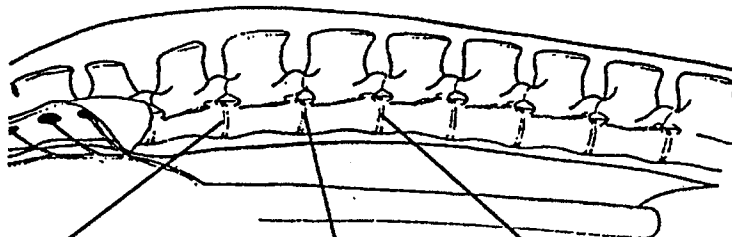
Position of Sheep: RIGHT Lateral Recumbency

-retroperitoneal approach to L3-L5 transverse process: ✓

-L2-L5 vertebral body exposure: ✓

Locations of incisions in anulus fibrosus:

\* NB disc spaces identified w/ 20ga needle



L5-L6

Treatment:  
Incision only.

L4-L5

Treatment:  
Sham.

L3-L4

Treatment:  
Incision only.

Treatment 2 moths after nucleotomy:

L5-L6 (caudal)

Treatment: PF matrix (BP 0.2ml w/ Vetbond seal)

L4-L5

Treatment:  
control - palpated only

L3-L4 (cranial)

Treatment:  
Sham w/ syringe puncture w/ Vetbond seal  
NB. needle insertion felt rough w/ fibrous +

Closure:

Fascia: 0 Dexon Other: interrupted Subcutaneous tissues: 2-0 Other: \_\_\_\_\_  
Skin: 2/0 Nylon Other: \_\_\_\_\_

continuous

Intraoperative Complications (describe):

Immediate (Day 1) postoperative neurologic status:

- 0 = Walking w/o any detectable ataxia
- 1 = Walking, slightly ataxic
- 2 = Walking, but with noticeable weakness on one side or both sides.
- 3 = Able to stand on forelimbs but dragging rear limbs
- 4 = Recumbent and unable to rise.

Observations made by: Sharon Turner

Date: [REDACTED]

Sheep #1  
✓ Pre-op Serum ~~L3-L4~~ Taken, 4 small vacutainers

✓ Sham - Syringe puncture / Seal <sup>Vetbond</sup> ~~L3-L4~~ L3-L4 (cran)

✓ Treatment ~~L3-L4~~ w/ PF matrix/BP L5-L6 (caudal)

✓ Control L4-L5

\* ~0.2ml matrix/BP was injected into L5-L6 caudal disc  
Puncture sealed with Vetbond.

\* Sham puncture: needle insertion felt rough into L3-L4  
possibly fibrous. Puncture sealed with Vetbond.